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INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Complete if Known

| | |
|------------------------|---------------|
| Application Number | 10/820,980 |
| Filing Date | April 7, 2004 |
| First Named Inventor | Amol Khare |
| Art Unit | 2681 2431 |
| Examiner Name | Unknown |
| Attorney Docket Number | 50325-0892 |

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| Sheet | 1 | of | 1 |
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NON PATENT LITERATURE DOCUMENTS

[illegible]

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|-----------------------|-----------------|--------------------|------------|
| Examiner Signature | /Shin Hon Chen/ | Date Considered | 08/29/2009 |
|-----------------------|-----------------|--------------------|------------|

*EXAMINER: Initial if reference considered, **whether** or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Customer Ref. No.